

D.N.J. LOCAL FORM 8**UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY**

IN RE:

)
)
)
)
)

CASE NO.

_____ DEBTOR(S) _____)

SUMMARY OF CHAPTER 13 PLAN

Each Plan or modified Plan must be accompanied by a summary submitted in the following form. Failure to submit this summary may result in dismissal of the case.

1. Amount of payment to be made by the debtor to the Trustee 1. \$ _____
2. Number of payments 2. _____
(NOTE: use 1 = Monthly; 2 = Semi-Monthly; 3 = Bi-Weekly;
4 = Weekly)
3. Amount to be paid to *unsecured* creditors. State either:
- (a) percentage to be paid each unsecured claim 3. (a) _____
- or-**
- (b) total money to be paid to unsecured creditors 3. (b) \$ _____

4. For *secured* creditors, whose default is being cured, provide the following data: (Continue on reverse side if additional space is needed.)

NAME	DESCRIPTION OF COLLATERAL	PAYMENT PER MONTH UNDER PLAN	TOTAL AMOUNT OF DEFAULT TO BE CURED*

5. For other *secured* creditors being dealt with under the Plan, provide the following: (Continue on reverse side if additional space is needed.)

NAME	COLLATERAL AND VALUE CLAIMED	MONTHLY PLAN PAYMENTS	TOTAL PLAN PAYMENTS*

* Total must include interest. If debtor contends that interest is not payable, state reason under No. 7.

D.N.J. Local Form 8

6. The Plan will be completed in _____ months.

7. Other information which should be included in a fair summary: (Continue on reverse side if additional space is needed.)

8. Check if applicable:

9 This is a modified plan.

9 The modified plan adversely affects creditors.

DATED: _____

ATTORNEY FOR DEBTOR

[Rev. April 15, 1997]